FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000087582 (1)

FILED Apr 27 1998 8:00am Secretary of State

TROMP	PEX CORPORATION					
Principal Place	e of Burdhess	Mailing Address				
12914 SW 132 COURT P.O. BOX 6814 SUITE C CORAL GABLES FL 33124						
MIAUN FL 33186 US					DO NOT WRITE IN THIS	SPACE
jug-					3. Date Incorporated or Qualified	
6 Deinain al Di	lana af Duringa	Do Marie a Address			01/03/1994	
2. Principal Place of Business 21 13380 SW131 STREET 26					4. FEI Number	Applied For
Suite, Apt. #, etc.					65-0457092	Not Applicable \$8.75 Additional
22 SUITE 126 27 City & State City & State					5, Certificate of Status Desired	Fee Required
23 MIA	MI, FL	28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 3318	36 Country S A	Zip	Country		8. This corporation owes or has paid the cu	' '
24 3312		1	30		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
	9. Name and Address of Current R	ishistaton whatti	81 N	lame	IV. Haille and wholess of Haw tradistated	Whalif
	OINYAN, TIMI					
12914 SW 133RD COURT SUITE C				treet Addre	ess (P.O. Box Number is Not Acceptable)	
	MI FL 33186		83			
			84 C	City		85 Zip Code
·					FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered						
agent. I a	m familiar with and accept the obligation	ins of, Section 607.0505, Flor	rida Statutes.		3 - 10	-98
SIGNATURE	Signature typed or printed name of registered agent a	and title if applicable INOTE	Registered Agent si	onalise taouire		70
12.	OFFICERS AND U		13.	gridio e regare	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	Р	DELETE	1.1 TITLE			Change Addition
NAME	OKOINYAN, TIMI		12 NAME			C. TE 126
STREET ADDRESS	12914 SW 133RD COURT, SUIT	E B	1.3 STREET ADD	RESS 13	380 SW 131 STREET	, Suite in
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZE	P M	11AMI, FL. 33186	
TITLE	VP	☐ DELETE	2.1 TITLE			Change Addition
NAME	OKOINYAN, PAT E	_	2.2 NAME		380 SW 131 STREET,	CHITE 126
STREET ADDRESS	12914 SW 133 COURT, SUITE E	3	2.3 STREET ADD	RESS 13	380 SW ISI SIREE!	34.72 .20
CITY-ST-ZIP	MIAMI FL		2. 4 CITY - ST - 2	IP M	11AMI, FL. 33186	
TITLE		L_] DELETE	3 1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADD			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-Z	* -		☐ Change ☐ Addition
NAME			4.3 THE 4. 2 NAME	1		T clearings T Montroll
STREET ADDRESS			4.3 STREET ADD	weee		
				I		
CITY-ST-ZIP TITLE	DELETE		4.4 CITY - ST - ZIP 5.1 TITEE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADD	RESS		
CITY-ST-ZIP			5.4 CITY-\$T-21	1		
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADD	RESS		
CITY-ST-ZIP			6.4 CITY - ST - ZII	- 1		

14. I horeby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

3-20-98 305-234-5393